



Submitted via regulations.gov

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William N. Parham III
Director, Paperwork Reduction Staff
Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development
Attention Document Identifier/OMB Control Number 10861
Room C4-26-C05
7500 Security Boulevard
Baltimore, MD 21244

Re: Medicare Health Outcomes Survey Field Test (CMS-10861)

Dear Mr. Parham:

CVS Health appreciates the opportunity to provide feedback on the Medicare Health Outcomes Survey (HOS) Field Test.

CVS Health is the leading health solutions company, delivering care like no one else can. We reach more people and improve the health of communities across America through our local presence, digital channels and approximately 300,000 dedicated colleagues — including more than 40,000 physicians, pharmacists, nurses, and nurse practitioners. Wherever and whenever people need us, we help them with their health — whether that's managing chronic diseases, staying compliant with their medications, or accessing affordable health and wellness services in the most convenient ways. We help people navigate the health care system — and their personal health care — by improving access, lowering costs and being a trusted partner for every meaningful moment of health. And we do it all with heart, every day.

We support CMS' use of field testing to ensure that the survey instruments and used in the Medicare Star Ratings program are valid, reliable, and are appropriately designed to capture accurate and complete responses reflective of the diverse Medicare population. We offer the following comments and recommendations to improve the HOS instrument and field test sampling methodology.

Sample Size Concerns

We support CMS conducting a field test of the web-based survey mode. While the introduction of the web-based survey mode has the potential to increase response rates, we believe it is important to determine whether the addition of the web-based mode creates any unintended survey bias compared to the standard mail and telephone outreach.

However, we are concerned that the proposed field test sample sizes are too low. In Table 1 of Supporting Statement B, CMS proposes a total HOS field test sample size of 340 enrollees within each participating contract, further broken down into a sample size of 170 enrollees in the experimental arm (web-mail-phone) and 170 enrollees in the control arm (mixed mode, mail-phone).

A sample size of 340 or below results in low reliability. Furthermore, CMS proposes that the two field test questionnaires – Version A and Version B – will have a sample size of 85 enrollees for each survey version. We are concerned that sample sizes this low will not provide sufficient data to conduct valid statistical analysis comparing response rates by subgroups (e.g., White vs. non-White; Dual vs. Non-Dual; English-speaking vs. Non-English speaking; Elderly vs. Younger Adult). Questions targeting social determinants of health (SDOH) are already likely to receive low response rates as they are focused on targeted populations. Under the proposed sample sizes, we would be unable to identify measurable differences in the way subgroups respond to these questions.

We recommend the following:

- CMS increase the sample sizes to ensure statistical validity, particularly among target subgroups. While we recognize that MAOs may request a voluntary oversample for inclusion in the field test, this comes at an additional cost to plans and must be performed for each contract.
- CMS consider changes to the sampling methodology, such as those recommended by the SNP Alliance, that would require minimum sample sizes to support comparisons between subgroups.

Provide Data to MAOs

We appreciate CMS' public engagement through the field test process and ask that the qualitative and quantitative results of the HOS field test be provided to stakeholders. Additionally, we ask CMS to explore ways to provide MAOs with annual HOS results in a more timely manner. Each HOS data set is complete at the end of the year. However, it is often the last data set provided to plans before Plan Preview. While we recognize that there are processes to review and validate the data, we ask that CMS provide the HOS data set to MAOs earlier in the year so that we may learn from the results and take actionable steps to improve enrollee outcomes in the following plan year.

HOS Field Test Questionnaires

Survey questions must be written in a way that can be understood by the diverse Medicare population regardless of race, ethnicity, age, income, education level, or other social factors. For this reason, we support Version B of the HOS field test questionnaire. Specific reasons include:

- Questions 2 and 12: Version B includes "walking at a brisk pace" as an example of a moderate activity whereas Version A, Question 2 includes "bowling, or playing golf." Of these two descriptions, the Version B "walking at a brisk pace" example is more likely to resonate with a majority of the population regardless of socioeconomic or sociodemographic status over the sport activity-focused examples used in Version A.



- Question 6: The question asks “How much time during the past 4 weeks (a) have you felt calm and peaceful and (b) did you have a lot of energy?” Both Version A and Version B include 5 response options ranging from “All of the time” to “None of the time.” However, Version A includes an additional response of “A good bit of the time.” We believe that this option is confusing and could be subjective based on the respondent’s interpretation of the response. We recommend the response set in Version B which eliminates this option and instead offers the response options of “all, most, some, a little, or none of the time.”

As reflected in both versions of the HOS instrument, both providers and Medicare Advantage plans play a role in addressing the SDOH risk factors (e.g., housing, food insecurity, transportation) that impact an enrollee’s outcomes. Therefore, it is important that CMS continue to work with plans and stakeholders to ensure that the HOS remains a statistically valid tool for measuring health outcomes and identifying ways to advance health equity within the Medicare population.

CVS Health welcomes the opportunity to work with CMS on further ways to strengthen the HOS and other survey instruments and quality measures used under the Medicare Advantage Star Ratings Program. Please do not hesitate to reach out if we can be of further assistance to you.

Sincerely,

A handwritten signature in black ink, appearing to read "Melissa Schulman".

Melissa Schulman
Senior Vice President, Government & Public Affairs
CVS Health